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Application No. (if known): 10/091,742

Attorney Docket No.: 56492RCE(71699)

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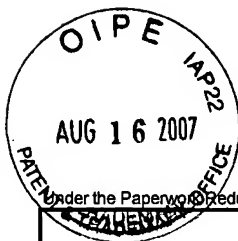
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Amendment Transmittal Form (1 page)

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Response to Final Office Action (39 pages)/including (4) pages of
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PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/091,742-Conf. #8190
	Filing Date	March 5, 2002
	First Named Inventor	James H. Anderson
	Art Unit	3715
	Examiner Name	J. A. Stallard
Total Number of Pages in This Submission	Attorney Docket Number	56492RCE(71699)

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form w/copy <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard Response includes (4) pages of attachments
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature			
Printed name	William J. Daley, Jr.		
Date	August 16, 2007	Reg. No.	35,487

BOS2_626257.1

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Dated: August 16, 2007

Signature: _____

(Pamela Samo)



AMENDMENT TRANSMITTAL LETTER				Docket No. 56492RCE(71699)	
Application No. 10/091,742-Conf. #8190		Filing Date March 5, 2002		Examiner J. A. Stallard	
Art Unit 3715					
Applicant(s): James H. Anderson et al.					
Invention: SIMULATION SYSTEM FOR IMAGE-GUIDED MEDICAL PROCEDURES					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	72	- 73 =	0	x 25.00	0.00
Independent Claims	5	- 5 =	0	x 100.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
<div style="text-align: center;"> William J. Daley, Jr. Attorney/Agent Reg. No.: 35,487</div>				Dated: <u>August 16, 2007</u>	
EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (617) 517-5556					
BOS2 626252.1					
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Dated: August 16, 2007		Signature: (Pamela Samo)			



Attorney Docket No. 56,492 RCE (71699)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS	J. H. Anderson, <i>et al</i>	EXAMINER:	Joseph A. Stallard
U.S.S.N.:	10/091,742	GROUP:	Group: 3715
FILED:	March 5, 2002	Conf. No.	Conf. No. 8190
FOR:	SIMULATION SYSTEM FOR IMAGE-GUIDED MEDICAL PROCEDURES		

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By: Pamela Sarno
Pamela Sarno

**EXAMINING GROUP 3715
RESPONSE TO FINAL OFFICE ACTION
UNDER 37 C.F.R. §116 EXPEDITED PROCEDURE**

Sir:

The following is in response to the Final Office Action mailed May 17, 2007, in the above referenced application.

Applicants believe that no extension of time is required since this response is being filed before the expiration of the specified time period. Applicants, however, conditionally petition for an extension of time to provide for the possibility that such a petition has been inadvertently overlooked and is required. As provided below charge Deposit Account No. **04-1105** for any required fee.

Applicant: J. H. Anderson, *et al*
U.S.S.N. 10/091,742
RESPONSE TO FINAL OFFICE ACTION
Page 2 of 35

Please amend the above-identified application as follows:

Amendments to the Claims begin on page 3 of this paper.

Remarks begin on page 24 of this paper.